FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1	ORGANIZATION		
1 Ottom 1	(See instructions)		Office use only
NAME OF COMMITTEE (in f	(Check if name Example: If is changed) over the line	f typying, type es 12FE4M5	
DOC PAC			
ADDRESS (number and s	rreet) 264 N. Lumpkin Street, #202		
(Check if address is changed)			
	Athens	GA GA	30601
	CITY▲	STATE▲	ZIP CODE 🛦
COMMITTEE'S E-MAI	ADDRESS (Please provide only one e-mail address)		
(Check if address is changed)	paul@pdscompliance.com		
			<u> </u>
(Check if address is changed)	PAGE ADDRESS (URL)		
2. DATE 10	/ D D / Y Y Y Y Y Y Z 0 1 0		
3. FEC IDENTIFICA	TION NUMBER C C003967	21	
4. IS THIS STATEM	ENT X NEW (N) OR A	AMENDED (A)	
I certify that I have examin	ned this Statement and to the best of my knowledge and belief	f it is true, correct and complete	
Type or Print Name of	reasurer Paul Kilgore		
Signature of Treasurer	Electronically Filed by Paul Kilgore	Date 1 C	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
NOTE: Submission of fal	se, erroneous, or incomplete information may subject the personal ANY CHANGE IN INFORMATION SHOULD		
Office Use Only	Federa	urther information contact: al Election Commission ree 800-424-9530	FEC FORM 1 (Revised 02/2009)